## DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 06/20/2006

## **Provider Inspection Summary**

For the period 05/01/2003 to 04/30/2006 Adult Day Care Facility STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

## **Facility Information**

Facility Name: DAYBREAK ADULT DAY SERVICES (0010084) Address: 7840 W BARNARD AVE, GREENFIELD, WI 53220

**License Status: REGULAR** 

Licensed/Certified/Registered 03/13/2003

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History** 

Survey ID: 0094184 End Date: 02/08/2005 Type: STANDARD Purpose: SURVEY/COMPLAINT

**Results:** STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10009070 Served 03/03/2005

Deficiencies Cited Subject Area Subject Area Subject Area Corrected

I.b.(4) HEALTH STATEMENT

III.b.(5) SAFETY-EMERGENCIES PLAN

III.c.(4) FIRE ALARM & SMOKE DETECTORS

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**Complaint History** 

Date Complaint Received: 01/21/2005 Date Investigation Completed: 02/07/2005

Subject Area(s) Result SOD #

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